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on March 19, 2001.
By *[Signature]*
Printed: Nancy L. Glenn

Docket No.: PF-0519-1 DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Hillman et al.

Title: HUMAN APOPTOSIS ASSOCIATED PROTEINS

Serial No.: 09/471,749 **Filing Date:** December 22, 1999

Examiner: Harris, A. Group Art Unit:1642

**Box Non-Fee Amendment
Commissioner for Patents
Washington, D.C. 20231**

AMENDMENT TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

1. Return Receipt Postcard;
 2. Response to Office Action (16 pp., in duplicate); and
 3. Revocation and Power of Attorney (2 pp.).

The fee has been calculated as shown below.

Claims	Claims After Amendment	-	Claims Previously Paid For	=	Present Extra	Other Than Small Entity Rate	Additional Fee(s)
Total Claims	23	-	30	=		\$18	\$0
Indep. Claims	3	-	3	=		\$80	\$0
<u>First Presentation of Multiple Dependent Claim</u>						+\$270	\$0

No additional fee is required.

X No additional fee is required.
Please charge Deposit Account No. 09-0108 the amount of \$

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. **09-0108**. A **duplicate copy of this sheet is enclosed**.

Respectfully submitted,

INCYTE GENOMICS, INC.

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